

## Policy: Emergency Workforce Management and Contingency Planning Policy

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### **Purpose of the Policy**

As an essential service Achieve Australia is required to continue to support people with a disability and their families whilst at the same time protecting the health, wellbeing and livelihoods of our staff.

Achieve Management is preparing our corporate services and operations for the impact of social distancing requirements, possible service closures, and reduction in workforce availability due to potential school closures, quarantine or sickness.

The purpose of this policy is to document Achieve Australia's Emergency Workforce Management and Contingency Planning.

### **1. Identifying and minimising staff risk**

As a result of COVID-19, Achieve Australia will put in place procedures deemed necessary to safeguard and minimise staff and client risk.

Currently this includes:

- Employee sign-on procedure requiring declaration of COVID-19 exposure and symptoms at the start of every shift or workday.
- Travel monitoring procedures.
- Minimising non-essential work travel between sites and face to face meetings.
- Workplace hygiene education (washing hands, coughing etiquette social distancing) and signage at sites about employee hygiene.
- Mandatory e-learning for all staff in Supporting People to Stay Infection Free (including coronavirus).
- Infection control flowchart (potential symptoms and next steps) and signage at each Achieve Australia location.
- Implementation of increased infection barrier control procedures to specific high-risk sites, such as Summer Hill.
- Testing for symptoms on high risk or other identified sites (e.g. temperature).
- Work from home where assessed as suitable for non-frontline staff.
- Key person risk assessment, social distancing and team splits to minimise potential impacts.
- Australian Government, Department of Health guidelines and instructions.



## **2. Leave Policy**

### **2.1 Personal Leave**

Full and part-time employees unable to come to work because they are diagnosed with COVID-19 can take paid personal leave. Full-time employees at Achieve accrue 10 days of sick or carer's leave each year. Any untaken leave carries over to the next year. Employees can use their sick leave if they are not fit for work due to personal illness.

Managers may request that an employee provides a medical certificate as evidence of any illness. If an employee has used up all their sick leave but are still unfit for work and have annual leave then their annual leave will be utilised. This occurs automatically unless the employee requests it to be unpaid leave. If the employee does not have annual leave then they will be required to go on unpaid leave.

### **2.2 Carers Leave**

If an employee needs to look after a family member or member of the employee's household who is sick with COVID-19, or suffers an unexpected emergency, the employee is also entitled to take paid personal/carers leave.

### **2.3 Unpaid Leave**

Full and part-time employees can take unpaid carers leave if they have no paid sick or carers leave remaining. An employee may be asked to provide evidence of the illness or unexpected emergency during this period.

### **2.4 Unexpected emergencies**

At this time school closures are not unexpected emergencies. Staff are required to plan in advance and provide information about their availability and arrangements should carer responsibilities mean that they are unavailable for work. As such, Achieve Australia has capped unexpected emergency related leave for looking after a child due to school closures to 2 days.

### **2.5 Special COVID-19 Leave - Exposure as a result of service delivery**

If an employee is exposed to confirmed cases of COVID-19 as a result of service delivery, Achieve will provide an additional 10 days of sick or carer's leave pro-rata (full-time) that will be accessible in addition to an employee's general personal leave balance. This special leave will come into play prior to the use of any annual leave balances. Should an employee be eligible for this additional leave, they will be provided with a letter from the CEO.

### **2.6. Special COVID-19 Leave - Casuals**

Should casuals be required to take leave related to COVID-19 exposure from their work in our service, they will be provided with up to 10 days sick leave (pro-rata), paid at base hourly rate without loading and aligned to their Achieve Australia average engagement pattern over the last 3 months. If a casual is eligible for this special leave, they will receive a letter from the CEO.

### **3. Contingency workforce management planning**

In the event of an emergency such as COVID-19 where there may be a reduction in workforce availability due to quarantine or sickness and potential service closures, a skeleton roster and employee mobility will be required to deliver critical service requirements.

#### **3.1 Determining workforce demand during an emergency: Skeleton frontline staff roster**

Skeleton frontline staff rostering may be applied during an emergency to cover a site, cluster of sites, or all sites. Skeleton frontline sites are defined as the minimum staff required to safely support Achieve Australia's 24/7 environment. Skeleton staffing takes into account the manual handling, personal care, medication, health care and specific needs of clients including staff skills and attributes at a site.

In the event of an emergency a skeleton staff roster will apply based on 3 shifts: Morning, Afternoon, Night. Each shift will be of 8 hours duration.

#### **3.2 Skeleton Staff Rostering: Determining workforce supply during an emergency**

Staff will have the opportunity prior to an emergency, as well as in the event of an emergency to advise of their availability and likely impacts the emergency will have on them. This information will be used to staff the skeleton roster.

In the current COVID-19 environment this means:

- Staff will be asked to identify the impacts on their attendance related to potential and likely scenarios that could eventuate, such as school closures.
- Staff will be invited to advise of their availability for additional shifts and work preferences in the event of an emergency where there may be stage shortages across sites.
- Staff will be invited to advise of their preferences should movement from one site to another be required to ensure we meet critical client care and deliver services during the emergency. This includes staff willingness and ability to travel between sites.
- In the event of an emergency, this information will be used to fill a skeleton roster.

#### **3.3 Staff roster impacts during an emergency: Employee Mobility and Shift Changes**

While preferences will be taken into account and met where possible, rostering decision making in an emergency will be based on critical service delivery required to support as many clients with disabilities as possible.

While minimum contract hours will be honoured, staff may be asked to conduct shifts outside their published roster and move between sites (either before or after the commencement of the shift).

Every effort will be made to minimise changes and movement and meet preferences where possible.

### **3.4 Teams formed to assist in roster deployment during an emergency**

A number of teams have or will be formed and be ready to deploy in the event of an emergency that produces critical staff shortages.

#### **3.4.1 Emergency roster team**

During an emergency, Achieve Australia will form an emergency roster team made up of central rostering teams, local site rostering teams and other individuals identified as the emergency surge roster team from across the organisation. The emergency roster team will deploy to Achieve Australia's Newington site or another identified location, with a nominated member of the Senior Leadership Team to commence emergency rostering to a skeleton staff roster.

#### **3.4.2 Infection control incident response team**

If an outbreak of COVID-19 occurs at any Achieve home or site, a special taskforce from across the organisation, including nurses and Clinical Nurse Educators, will be sent to the outbreak site. The Response Team will assist on site staff in directing services, take necessary actions to ensure the safety and wellbeing of all clients and staff, and help contain any further spread of the virus.

The infection control team are also deployed where there is a suspected or confirmed COVID-19 case. They educate staff on site, run through infection control procedures and measures that are necessary for the circumstances. The team keep up to date with Department of Health and other clinical requirements.

#### **3.4.3 Tactical resource team**

The tactical resource team is a dedicated team of staff from across the business available and trained to work in sites where there is or has been a COVID19 confirmed case. This team will be made up of staff members who expressed interest and were chosen to be part of the team. These team members will be paid an allowance and be entitled to extra leave.

#### **3.4.3 Leave Coverage Rover Team**

A dedicated team of approximately 30 staff will form a leave coverage rover team. This flexible team will be fully trained across high behavioural and clinical needs skills and orientated to a cluster of sites. Members of this team will have fixed hours per week and are deployed flexibly, and often at short notice to a site within their cluster to fill planned and unplanned leave.

#### **3.4.4 Emergency coverage - non-frontline employee team**

Expressions of interest from non-frontline employees will be called to form an emergency coverage non-frontline team. This team assists should there be shortages that were unable to be filled through general staff rostering, the tactical resource team and leave coverage team. This group of staff will go through essential disability services training to enable them to cover shifts or services for a short period of time with experienced frontline staff.

#### **3.4.5 Emergency coverage - volunteer team**

Expression of interest from community volunteers will be called for to form an emergency coverage volunteer team that will assist should there be shortages that were unable to be



filled through all internal staffing methods. This group of staff will be required to undertake stringent checks process and trained in essential disability services training to enable them to cover shifts or services for a short period of time with experienced frontline staff.

### **3.4.6 Potential collaboration with other providers for emergency coverage**

Achieve Australia will actively seek out partnerships with other providers and groups to share staff where emergencies necessitate this. Staff will be asked about their preferences and ability to be involved in due course.

## **4. Communicating and supporting staff during COVID-19**

### **4.1 General Employee Communications**

Achieve Australia is committed to communicating with staff, keeping them informed and engaged particularly during an emergency. This includes a dedicated intranet section for employees that is regularly updated as well as regular organisation wide communications, including latest updates in the Achieve Australia staff newsletter 'weekly briefing'.

### **4.2 Employee Communications if they are exposed to a suspected or confirmed case of COVID-19 in the workplace**

Should staff be potentially affected or exposed to a suspected or confirmed case of COVID-19 in the workplace, they will be contacted by Achieve and by the Department of Health where appropriate.

Achieve Australia follows the guidelines and directions of the Department of Health.

### **4.3 Employee supports and wellbeing**

Numerous employee supports are available including

- wellbeing supports and tools
- Access to up to 4 sessions with education, strategies, or coaching about how to navigate their current concern(s)
- Manager support program.

During COVID-19, managers have been pre-scheduled into fortnightly Manager support sessions focused on managing through challenging times.

Where necessary or appropriate, Achieve Australia will also provide Critical Incident Management sessions with external Senior Psychologists and Clinical Leaders.